

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Mary Bono Mack Committee

ADDRESS (number and street) ▼

PO Box 30844

☐ Check if different than previously reported. (ACC)

Bethesda

MD

20824-0844

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00332890

3. IS THIS REPORT

☐

NEW (N)

OR

☒

AMENDED (A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15 Quarterly Report (Q1)☒ July 15 Quarterly Report (Q2)☐ October 15 Quarterly Report (Q3)☐ January 31 Year-End Report (YE)☐ July 31 Mid-Year Report (Non-election Year Only) (MY)☐ Termination Report (TER)

(b) Monthly Report Due On:

☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11) (Non-Election Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12) (Non-Election Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William Powers

Signature of Treasurer

William Powers

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Mary Bono Mack Committee

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y
04		01		2013

To:

M M	/	D D	/	Y Y Y Y Y
06		30		2013

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <div><div>Y Y Y Y Y</div><div>2013</div></div>		<div><div></div><div>78113.09</div></div>
(b) Cash on Hand at Beginning of Reporting Period.....	<div><div></div><div>58497.38</div></div>	
(c) Total Receipts (from Line 19) .....	<div><div></div><div>40.4</div></div>	<div><div></div><div>19827.51</div></div>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<div><div></div><div>58537.78</div></div>	<div><div></div><div>97940.6</div></div>
7. Total Disbursements (from Line 31) .....	<div><div></div><div>11333.68</div></div>	<div><div></div><div>159601.54</div></div>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<div><div></div><div>47204.1</div></div>	<div><div></div><div>47204.1</div></div>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0</div></div>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<div><div></div><div>0</div></div>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**Mary Bono Mack Committee**

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y Y Y
04	/	01	/	2013

To:

M M	/	D D	/	Y Y Y Y Y Y
06	/	30	/	2013

**I. Receipts**
**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0

700

(ii) Unitemized .....

0

-50

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

0

650

(b) Political Party Committees .....

0

0

(c) Other Political Committees

(such as PACs).....

0

2000

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) .....

0

2650

## 12. Transfers From Affiliated/Other

Party Committees.....

33.82

4783.82

## 13. All Loans Received .....

0

0

## 14. Loan Repayments Received.....

0

0

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0

12374.1

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0

0

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

6.58

19.59

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0

0

(b) Levin Funds (from Schedule H5) .....

0

0

(c) Total Transfers (add 18(a) and 18(b))..

0

0

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

40.4

19827.51

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

40.4

19827.51

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0	0
(ii) Non-Federal Share.....	0	0
(b) Other Federal Operating Expenditures .....	11333.68	153451.54
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	11333.68	153451.54
22. Transfers to Affiliated/Other Party Committees.....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0	650
(b) Political Party Committees .....	0	0
(c) Other Political Committees (such as PACs).....	0	500
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0	1150
29. Other Disbursements .....	0	5000
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0	0
(ii) "Levin" Share.....	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11333.68	159601.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11333.68	159601.54

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	0	2650
34. Total Contribution Refunds (from Line 28(d)) .....	0	1150
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0	1500
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	11333.68	153451.54
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0	12374.1
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	11333.68	141077.44

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 6 OF 17

☐ 11a ☐ 11b ☐ 11c ☒ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

## **A. Mary Bono Mack Victory Fund**

Mailing Address PO Box 30844

City  
Bethesda

State  
MD

Zip Code  
20824-0844

FEC ID number of contributing  
federal political committee.

**C** C00493387

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

33.82

Date of Receipt

**04** / **10** / **2013**

**Transaction ID : 69175-32414-c**

Amount of Each Receipt this Period

33.82

Final Transfer of Net Proceeds

Full Name (Last, First, Middle Initial)

## **B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

## **C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

33.82

33.82

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 17

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

**A. AT&T Mobility**

Mailing Address PO Box 537104

City Atlanta    State GA    Zip Code 30353-7104

Purpose of Disbursement  
Cellular Phone Service

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    02    2013
**Transaction ID : SB21B-36131-32400-e**

Amount of Each Disbursement this Period

115.13

Full Name (Last, First, Middle Initial)

**B. Ed Miyagishima**Mailing Address 405 South Dale Mabry Highway  
Suite 405

City Tampa    State FL    Zip Code 33609

Purpose of Disbursement  
Strategic Campaign Consulting

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    02    2013
**Transaction ID : SB21B-70676-32401-e**

Amount of Each Disbursement this Period

2000

Full Name (Last, First, Middle Initial)

**C. Verizon Wireless**

Mailing Address PO Box 660108

City Dallas    State TX    Zip Code 75266-0108

Purpose of Disbursement  
Cellular Phone Service

001

Candidate Name

Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

State:    District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04    05    2013
**Transaction ID : SB21B-68241-32409-e**

Amount of Each Disbursement this Period

251.94

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2367.07

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

**A. Bieber Communications**Mailing Address 3609 W Mac Arthur Boulevard  
Suite 812

City Santa Ana State CA Zip Code 92704

Purpose of Disbursement  
Website Development

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 10 / 2013**Transaction ID : SB21B-63030-32410-e**

Amount of Each Disbursement this Period

1998.93

Full Name (Last, First, Middle Initial)

**B. Paychex**Mailing Address 3060 Williams Drive  
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Payroll Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 10 / 2013**Transaction ID : SB21B-62341-32425-e**

Amount of Each Disbursement this Period

54

Full Name (Last, First, Middle Initial)

**C. Ed Miyagishima**Mailing Address 405 South Dale Mabry Highway  
Suite 405

City Tampa State FL Zip Code 33609

Purpose of Disbursement  
Strategic Campaign Consulting

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y  
04 / 12 / 2013**Transaction ID : SB21B-70676-32413-e**

Amount of Each Disbursement this Period

1000

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3052.93

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 17

☒ 21b    ☐ 22    ☐ 23    ☐ 24    ☐ 25    ☐ 26  
☐ 27    ☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

**A. Visa Business Card**

Mailing Address PO Box 15796

City  
WilmingtonState  
DEZip Code  
19886-5796Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      12      2013
**Transaction ID : SB21B-36139-32412-e**

Amount of Each Disbursement this Period

423.49

**B. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824-0844Purpose of Disbursement  
Compliance Services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      16      2013
**Transaction ID : SB21B-36120-3036-V**

Amount of Each Disbursement this Period

100

**[MEMO ITEM]**

Subitemization of Campaign Financial Services ( 04/16/13 )

**C. Campaign Financial Services**

Mailing Address PO Box 30844

City  
BethesdaState  
MDZip Code  
20824-0844Purpose of Disbursement  
Printing

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State:                      District:

Disbursement For:  
☐ Primary    ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
04      16      2013
**Transaction ID : SB21B-36120-3038-V**

Amount of Each Disbursement this Period

6.25

**[MEMO ITEM]**

Subitemization of Campaign Financial Services ( 04/16/13 )

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

423.49

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 10 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Mary Bono Mack Committee

Full Name (Last, First, Middle Initial)

**A. Campaign Financial Services**

Mailing Address PO Box 30844

City	State	Zip Code
Bethesda	MD	20824-0844

Purpose of Disbursement  
SEE MEMO ITEMS

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Transaction ID : SB21B-36120-32415-e

Amount of Each Disbursement this Period

136.25
--------

Full Name (Last, First, Middle Initial)

**B. Complete Campaigns**

Mailing Address 205 Pennsylvania Avenue SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement  
Software Service

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		16		2013

Transaction ID : SB21B-36127-32416-e

Amount of Each Disbursement this Period

600
-----

Full Name (Last, First, Middle Initial)

**C. Financial Disclosure Services**

Mailing Address PO Box 30844

City	State	Zip Code
Bethesda	MD	20824

Purpose of Disbursement  
Compliance Consulting

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		22		2013

Transaction ID : SB21B-70682-32417-e

Amount of Each Disbursement this Period

312.5
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SUBTOTAL of Disbursements This Page (optional).....▶

TOTAL This Period (last page this line number only).....▶

1048.75
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# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 11 OF 17

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

## **A. Newtek Technology Services**

Mailing Address 1904 West Parkside Lane  
Second Floor

City Phoenix State AZ Zip Code 85027

Purpose of Disbursement  
Web Hosting Fee

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 04 / 25 / 2013

**Transaction ID : SB21B-70675-32419-e**

Amount of Each Disbursement this Period

51.95

Full Name (Last, First, Middle Initial)

## **B. AT&T Mobility**

Mailing Address PO Box 537104

City Atlanta State GA Zip Code 30353-7104

Purpose of Disbursement  
Cellular Phone Service

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 04 / 30 / 2013

**Transaction ID : SB21B-36131-32421-e**

Amount of Each Disbursement this Period

117.21

Full Name (Last, First, Middle Initial)

## **C. Paychex**

Mailing Address 3060 Williams Drive  
Suite 200

City Fairfax State VA Zip Code 22031

Purpose of Disbursement  
Payroll Fees

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
 State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

001

Category/  
Type

Date of Disbursement

M M / D D / Y Y Y Y Y  
 05 / 06 / 2013

**Transaction ID : SB21B-62341-32423-e**

Amount of Each Disbursement this Period

10.95

**SUBTOTAL** of Disbursements This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

180.11

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Mary Bono Mack Committee

Subitemization of Campaign Financial Services (05/14/13 )

167.31

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

## Mary Bono Mack Committee

Category/  
Type

1125

05 / 28 / 2013

Category/  
Type

Amount of Each Disbursement this Period

Category/  
Type

1411.95

FEC Schedule B (Form 3X) Rev. 02/2003



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 15 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

**A. Facebook**

Mailing Address 156 University Avenue

City	State	Zip Code
Palo Alto	CA	94301

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

**Transaction ID : SB21B-68120-3046-V**

Amount of Each Disbursement this Period

982.76
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**[MEMO ITEM]**

Subitemization of Visa Business Card ( 06/27/13 )

**B. Bank of America**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 3530

City	State	Zip Code
Rancho Cordova	CA	95741-3530

Purpose of Disbursement  
Service Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

**Transaction ID : SB21B-63106-3047-V**

Amount of Each Disbursement this Period

57.08
-------

**[MEMO ITEM]**

Subitemization of Visa Business Card ( 06/27/13 )

**C. Facebook**

Full Name (Last, First, Middle Initial)

Mailing Address 156 University Avenue

City	State	Zip Code
Palo Alto	CA	94301

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		27		2013

**Transaction ID : SB21B-68120-3064-V**

Amount of Each Disbursement this Period

200
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**[MEMO ITEM]**

Subitemization of Visa Business Card ( 06/27/13 )

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

0.00
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**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Mary Bono Mack Committee**

Full Name (Last, First, Middle Initial)

**A. Brian Nestande for Congress**

Mailing Address 2150 River Plaza Drive

City	State	Zip Code
Sacramento	CA	95833

Purpose of Disbursement  
Printing

003

Candidate Name

**Brian Nestande**Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2014  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 36

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		30		2013

**Transaction ID : SB23-70683-32420-I**

Amount of Each Disbursement this Period

1998.93
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**[MEMO ITEM]****B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
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Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

0.00
0.00